

Hennet Exhibit 1

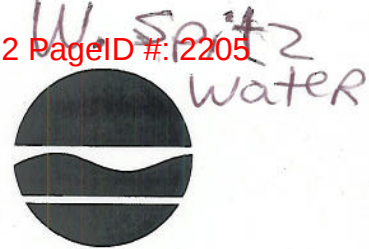
New York State Department of Environmental Conservation

Division of Environmental Permits, Region One

50 Circle Road, Stony Brook, New York 11790-3409

Phone: (631) 444-0357 • FAX: (631) 444-0360

Website: www.dec.state.ny.us

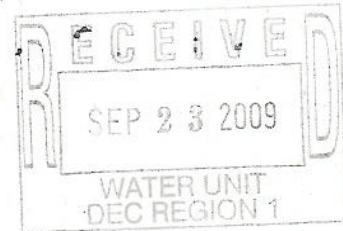


Alexander Grannis
Commissioner

September 18, 2009

Superintendent of Public Works
P.O. Box 457
Ocean Beach, NY 11770

RE: NYSDEC Permit #1-4728-00247/00001
SPDES Facility # NY0020168
FACILITY: Ocean Beach Sewage Treatment Plant
Attn.: Kevin Schelling, Superintendent



Dear Permittee:

Enclosed is your State Pollutant Discharge Elimination System (SPDES) permit.

Please read all permit conditions carefully. All permit documents must be available upon request by the Department staff and must be distributed to and understood by personnel responsible for the proper operation of the facility and compliance with the discharge limits. Any violations of these permit conditions constitutes a violation of the Environmental Conservation Law.

The Department maintains authority regarding the terms of this permit in accordance with 6 NYCRR 750. This regulation may be accessed from the internet at the Department's website, <http://www.dec.state.ny.us/website/regs/750.htm> for HTML format or http://www.dec.state.ny.us/website/dow/part_750.pdf for a two-sided format suitable for binding and copying. If you do not have website access, you may obtain a paper copy of the regulations at NYSDEC-Env. Permits, SUNY @ Stony Brook, 50 Circle Road, Stony Brook, NY 11790-3409.

Pursuant to 621.9(2), if a permit is issued with objectionable conditions the applicant may request a hearing. This must be done within 30 days of the postmark on this letter. To request a hearing, contact the Regional Permit Administrator at the above address.

If you have any other questions regarding this permit, you may contact the Division of Environmental Permits at the above address. Please refer to the above referenced numbers when you are corresponding with this office or when you are applying to renew or modify this permit.

Any questions regarding the annual pollutant discharge elimination fee should be addressed directly to the Regulatory Fee Determination Unit at 1-800-225-2566.

Very truly yours,

Susan V. Ackerman
Environmental Analyst

Enclosure
SVA/lis

cc: W. Spitz
NCDHS
BWP Permit Coordinator
File



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
State Pollutant Discharge Elimination System (SPDES)
DISCHARGE PERMIT

First3.99

Industrial Code: **4952**
 Discharge Class (CL): **07**
 Toxic Class (TX): **N**
 Major Drainage Basin: **17**
 Sub Drainage Basin: **01**
 Water Index Number:
 Compact Area:

SPDES Number: **NY- 0020168**
 DEC Number: **1-4728-00247/00001**
 Effective Date (EDP): **04/01/2006**
 Expiration Date (ExDP): **03/31/2011**
 Modification Dates:(EDPM) **11/01/2009**

This SPDES permit is issued in compliance with Title 8 of Article 17 of the Environmental Conservation Law of New York State and in compliance with the Clean Water Act, as amended, (33 U.S.C. §1251 et. seq.)(here in after referred to as "the Act").

PERMITTEE NAME AND ADDRESS

Name: **Village of Ocean Beach**
 Street: **PO Box 457**
 City: **Ocean Beach**

Attention: **Village Superintendent**

State: **NY** Zip Code: **11770**

is authorized to discharge from the facility described below:

FACILITY NAME AND ADDRESS

Name: **Ocean Beach Sewage Treatment Plant**
 Location (C,T,V): **Village of Ocean Beach**
 Facility Address: **940 Surf Ave.**
 City: **Ocean Beach**

County: **Suffolk**
 Tax Map # **502-001-4-56**
 State: **NY** Zip Code: **11770**

NYTM -E:

NYTM - N:

From Outfall No.: **1** at Latitude: **40 N 39 ' 29 "** & Longitude: **73 W 9 ' 4 "**
 into receiving waters known as: **Great South Bay, North of Surf View Walk** Class: **SA**

and; (list other Outfalls, Receiving Waters & Water Classifications)

in accordance with: effluent limitations; monitoring and reporting requirements; other provisions and conditions set forth this permit; and 6 NYCRR Part 750-1.2(a) and 750-2.

DISCHARGE MONITORING REPORT (DMR) MAILING ADDRESS

Mailing Name: **Kevin Schelling, Superintendent of Public Works**
 Street: **PO Box 457**
 City: **Ocean Beach**
 Responsible Official or Agent: **Superintendent Kevin Schelling**

State: **NY** Zip Code: **11770**
 Phone: **(631) 583-7682**

This permit and the authorization to discharge shall expire on midnight of the expiration date shown above and the permittee shall not discharge after the expiration date unless this permit has been renewed, or extended pursuant to law. To be authorized to discharge beyond the expiration date, the permittee shall apply for permit renewal not less than 180 days prior to the expiration date shown above.

DISTRIBUTION:

CO BWP - Permit Coordinator

RWE
 RPA
 EPA Region II - Michelle Josilo
 BWC
 SCDHS

Permit Administrator: Susan Ackerman	
Address: 50 Circle Road - SUNY Stony Brook, New York 11790-3409	
Signature:	Date: 09 /18 /2009

SPDES PERMIT NUMBER NY 0020168

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PERMIT LIMITS, LEVELS AND MONITORING DEFINITIONS:

OUTFALL	WASTEWATER TYPE		RECEIVING WATER	EFFECTIVE	EXPIRING	
	This cell describes the type of wastewater authorized for discharge. Examples include process or sanitary wastewater, storm water, non-contact cooling water.		This cell lists classified waters of the state to which the listed outfall discharges.	The date this page starts in effect. (e.g. EDP or EDPM)	The date this page is no longer in effect. (e.g. ExDP)	
PARAMETER		MINIMUM	MAXIMUM	UNITS	SAMPLE FREQ.	SAMPLE TYPE
e.g. pH, TRC, Temperature, D.O.		The minimum level that must be maintained at all instants in time.	The maximum level that may not be exceeded at any instant in time.	SU, °F, mg/l, etc.		
PARA-METER	EFFLUENT LIMIT	PRACTICAL QUANTITATION LIMIT (PQL)	ACTION LEVEL	UNITS	SAMPLE FREQUENCY	SAMPLE TYPE
	Limit types are defined below in Note 1. The effluent limit is developed based on the more stringent of technology-based standards, required under the Clean Water Act, or New York State water quality standards. The limit has been derived based on existing assumptions and rules. These assumptions include receiving water hardness, pH and temperature; rates of this and other discharges to the receiving stream; etc. If assumptions or rules change the limit may, after due process and modification of this permit, change.	For the purposes of compliance assessment, the analytical method specified in the permit shall be used to monitor the amount of the pollutant in the outfall to this level, provided that the laboratory analyst has complied with the specified quality assurance/quality control procedures in the relevant method. Monitoring results that are lower than this level must be reported, but shall not be used to determine compliance with the calculated limit. This PQL can be neither lowered nor raised without a modification of this permit.	Type I or Type II Action Levels are monitoring requirements, as defined below in Note 2, that trigger additional monitoring and permit review when exceeded.	This can include units of flow, pH, mass, Temperature, concentration. Examples include µg/l, lbs/d, etc.	Examples include Daily, 3/week, weekly, 2/month, monthly, quarterly, 2/yr and yearly.	Examples include grab, 24 hour composite and 3 grab samples collected over a 6 hour period.

Note 1: DAILY DISCHARGE: The discharge of a pollutant measured during a calendar day or any 24-hour period that reasonably represents the calendar day for the purposes of sampling. For pollutants expressed in units of mass, the 'daily discharge' is calculated as the total mass of the pollutant discharged over the day. For pollutants with limitations expressed in other units of measurement, the 'daily discharge' is calculated as the average measurement of the pollutant over the day. **DAILY MAX:** The highest allowable daily discharge. **DAILY MIN:** The lowest allowable daily discharge. **MONTHLY AVG (daily avg):** The highest allowable average of daily discharges over a calendar month, calculated as the sum of each of the daily discharges measured during a calendar month divided by the number of daily discharges measured during that month. **RANGE:** The minimum and maximum instantaneous measurements for the reporting period must remain between the two values shown. **7 DAY ARITHMETIC MEAN (7 day average):** The highest allowable average of daily discharges over a calendar week. **12 MRA (twelve month rolling avg):** The average of the most recent twelve month's monthly averages. **30 DAY GEOMETRIC MEAN (30 d geo mean):** The highest allowable geometric mean of daily discharges over a calendar month, calculated as the antilog of: the sum of the log of each of the daily discharges measured during a calendar month divided by the number of daily discharges measured during that month. **7 DAY GEOMETRIC MEAN (7 d geo mean):** The highest allowable geometric mean of daily discharges over a calendar week.

Note 2: ACTION LEVELS: Routine Action Level monitoring results, if not provided for on the Discharge Monitoring Report (DMR) form, shall be appended to the DMR for the period during which the sampling was conducted. If the additional monitoring requirement is triggered as noted below, the permittee shall undertake a short-term, high-intensity monitoring program for the parameter(s). Samples identical to those required for routine monitoring purposes shall be taken on each of at least three consecutive operating and discharging days and analyzed. Results shall be expressed in terms of both concentration and mass, and shall be submitted no later than the end of the third month following the month when the additional monitoring requirement was triggered. Results may be appended to the DMR or transmitted under separate cover to the same address. If levels higher than the Action Levels are confirmed, the permit may be reopened by the Department for consideration of revised Action Levels or effluent limits. The permittee is not authorized to discharge any of the listed parameters at levels which may cause or contribute to a violation of water quality standards. **TYPE I:** The additional monitoring requirement is triggered upon receipt by the permittee of any monitoring results in excess of the stated Action Level. **TYPE II:** The additional monitoring requirement is triggered upon receipt by the permittee of any monitoring results that show the stated action level exceeded for four of six consecutive samples, or for two of six consecutive samples by 20 % or more, or for any one sample by 50 % or more.

PERMIT LIMITS, LEVELS AND MONITORING:

OUTFALL No.	LIMITATIONS APPLY:	RECEIVING WATER	EFFECTIVE	EXPIRING
1	All Year	Great South Bay	EDPM	EXDP

PARAMETER	EFFLUENT LIMIT					MONITORING REQUIREMENTS				FN
	Type	Limit	Units	Limit	Units	Sample Frequency	Sample Type	Location		
								Influent	Effluent	
Flow	Monthly Avg	0.50	MGD	-	-	Continuous	Meter	-	X	-
BOD ₅	Monthly Avg	30	mg/l	130	lbs/d	2 / Month	6 hr. comp.	X	X	(1)
BOD ₅	7 Day Avg	45	mg/l	190	lbs/d	2 / Month	6 hr. comp.	-	X	(1)
Solids, Suspended	Monthly Avg	30	mg/l	130	lbs/d	2 / Month	6 hr. comp.	X	X	(1)
Solids, Suspended	7 Day Avg	45	mg/l	190	lbs/d	2 / Month	6 hr. comp.	-	X	(1)
Solids, Settleable	Daily max	0.3	ml/l	-	-	1 / Day	Grab	-	X	(2)
pH	Range	6.0-8.5	SU	-	-	1 / Day	Grab	-	X	(2)
Nitrogen, TKN (as N)	Monthly Avg	Monitor	mg/l	-	-	1 / Quarter	Grab	-	X	(2)
Nitrite (as N)	Monthly Avg	Monitor	mg/l	-	-	1 / Quarter	Grab	-	X	(2)
Nitrate (as N)	Monthly Avg	Monitor	mg/l	-	-	1 / Quarter	Grab	-	X	(2)
Nitrogen, Total (as N)	Monthly Avg	Monitor	mg/l	Calculate	lbs/d	1 / Quarter	Grab	-	X	(2)
Temperature	Daily Max	Monitor	Deg F	-	-	1 / Day	Grab		X	(2)
Coliform, Fecal	30 day Geometric Mean	200	No./ 100 ml	-	-	1 / Month	Grab	-	X	(2, 4, 5)
Coliform, Fecal	7 day Geometric Mean	400	No./ 100 ml	-	-	1 / Month	Grab	-	X	(2, 4, 5)
Coliform, Total	Monthly Median	700	No./ 100 ml	-	-	1 / Month	Grab	-	X	(2, 4, 5)
Chlorine, Total Residual	Daily Max	0.60	mg/l	-	-	1 / Day	Grab	-	X	(3)

FOOTNOTES: (1) and effluent shall not exceed 35 % of influent concentration values for BOD₅ & TSS during the period of May 1 through October 31.

(2) Samples shall be taken during the periods of normally high flows.

(3) An interim Total Residual Chlorine limit of 2.0 mg/l is in effect until the disinfection system is upgraded to meet the final effluent limit of 0.60 mg/l in accordance with the Schedule of Compliance in this permit.

FOOTNOTES continued on next page

FOOTNOTES continued

(4) Additional sampling to assure adequacy and consistency of disinfection for the protection of shellfish harvesting; each April and August. Permittee shall analyze Fecal and Total coliform grab samples:

- (a) Taken twice on each of seven consecutive days.
- (b) Report the above results in a addendum to the applicable Discharge Monitoring Report.
- (c) Include the above results in applicable Discharge Monitoring Report calculations.

(5) Additional Coliform Limitations and Requirements:

- (a) The multiple tube fermentation procedure (MPN) is the only approved fecal and total coliform testing procedure.
- (b) Facilities may regularly sample on a more frequent schedule than the minimum required by this permit.
- (c) For facilities sampling less than ten (10) times per month, the estimated 90th percentile of total coliform readings shall not exceed an MPN of 3,300/100 ml for the 3 tube per decimal dilution MPN test, nor an MPN of 2,300/100 for the 5 tube per decimal dilution MPN test. The estimated 90th percentile is calculated using the Guideline in the National Shellfish Sanitation Program Manual of Operations, 1989 revision, Page APF-3 or the method found at www.cfsan.fda.gov/~ear/nss2-42g.html.
- (d) For facilities sampling ten (10) or more times per month, no more than 10 percent of the total coliform readings shall exceed an MPN of 3,300/ 100 ml for the 3 tube per decimal dilution MPN test, nor an MPN of 2,300/100 ml for the 5 tube per decimal dilution MPN test

SPECIAL CONDITIONS:

DISCHARGE NOTIFICATION REQUIREMENTS

- (a) Except as provided in (c) and (f) of these Discharge Notification Act requirements, the permittee shall install and maintain identification signs at all outfalls to surface waters listed in this permit. Such signs shall be installed before initiation of any discharge.
- (b) Subsequent modifications to or renewal of this permit does not reset or revise the deadline set forth in (a) above, unless a new deadline is set explicitly by such permit modification or renewal.
- (c) The Discharge Notification Requirements described herein do not apply to outfalls from which the discharge is composed exclusively of storm water, or discharges to ground water.
- (d) The sign(s) shall be conspicuous, legible and in as close proximity to the point of discharge as is reasonably possible while ensuring the maximum visibility from the surface water and shore. The signs shall be installed in such a manner to pose minimal hazard to navigation, bathing or other water related activities. If the public has access to the water from the land in the vicinity of the outfall, an identical sign shall be posted to be visible from the direction approaching the surface water.

The signs shall have minimum dimensions of eighteen inches by twenty four inches (18" x 24") and shall have white letters on a green background and contain the following information:

N.Y.S. PERMITTED DISCHARGE POINT

SPDES PERMIT No.: NY _____

OUTFALL No. : _____

For information about this permitted discharge contact:

Permittee Name: _____

Permittee Contact: _____

Permittee Phone: () - ### - ####

OR:

NYSDEC Division of Water Regional Office Address :

NYSDEC Division of Water Regional Phone: () - ### - ####

- (e) For each discharge required to have a sign in accordance with a), the permittee shall, concurrent with the installation of the sign, provide a repository of copies of the Discharge Monitoring Reports (DMRs), as required by the **RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS** page of this permit. This repository shall be open to the public, at a minimum, during normal daytime business hours. The repository may be at the business office repository of the permittee or at an off-premises location of its choice (such location shall be the village, town, city or county clerk's office, the local library or other location as approved by the Department). In accordance with the **RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS** page of your permit, each DMR shall be maintained on record for a period of five years.

SPECIAL CONDITIONS continued on next page

SPECIAL CONDITIONS continued

- (f) All requirements of the Discharge Notification Act, including public repository requirements, are waived for any outfall meeting any of the following circumstances, provided Department notification is made in accordance with (g):
- (i) such sign would be inconsistent with any other state or federal statute;
 - (ii) the Discharge Notification Requirements contained herein would require that such sign could only be located in an area that is damaged by ice or flooding due to a one-year storm or storms of less severity;
 - (iii) instances in which the outfall to the receiving water is located on private or government property which is restricted to the public through fencing, patrolling, or other control mechanisms. Property which is posted only, without additional control mechanisms, does not qualify for this provision;
 - (iv) instances where the outfall pipe or channel discharges to another outfall pipe or channel, before discharge to a receiving water; or
 - (v) instances in which the discharge from the outfall is located in the receiving water, two-hundred or more feet from the shoreline of the receiving water.
- (g) If the permittee believes that any outfall which discharges wastewater from the permitted facility meets any of the waiver criteria listed in (f) above, notification (form enclosed) must be made to the Department's Bureau of Water Permits, Central Office, of such fact, and, provided there is no objection by the Department, a sign and DMR repository for the involved outfall(s) are not required. This notification must include the facility's name, address, telephone number, contact, permit number, outfall number(s), and reason why such outfall(s) is waived from the requirements of discharge notification. The Department may evaluate the applicability of a waiver at any time, and take appropriate measures to assure that the ECL and associated regulations are complied with.
- (h) The permittee shall periodically inspect the outfall identification signs in order to ensure that they are maintained, are still visible and contain information that is current and factually correct. Signs that are damaged or incorrect shall be replaced within 3 months of inspection. *Data Retention:* The permittee shall retain records for a minimum period of 5 years in accordance with 6NYCRR Part 750-1.12(b)(2) and Part 750-2.5(c)(1). These records, which include discharge monitoring reports (DMRs) and annual reports, must be retained at a repository accessible to the public. This repository shall be open to the public, at a minimum, during normal daytime business hours. The repository may be the business office, wastewater treatment plant, village, town, city, or county clerk's office, the local library, or other location approved by the Department.

WATER TREATMENT CHEMICAL (WTC) REQUIREMENTS

New or increased use of a WTC requires prior DEC review and authorization. At a minimum, the permittee must notify the DEC in writing of its intent to change WTC use by submitting a completed WTCFX Form for each WTC. The DEC will review that submittal and determine if a SPDES permit modification is necessary or whether WTC review and authorization may proceed outside of the formal permit administrative process. **The majority of WTC authorizations do not require formal SPDES permit modification.** WTCs which are used in closed systems and cannot be discharged or those which are discharged to municipal STP do not require DEC review. **WTC use and discharge questions or requests for forms** should be directed to the DEC staff person who developed your SPDES permit. If you are not sure who that is, contact the DEC staff person who last inspected your facility.

Examples of WTCs include biocides, coagulants, conditioners, corrosion inhibitors, defoamers, flocculants, scale inhibitors, sequestrants, and settling aids. DEC staff may also direct you to use a WTCFX Form for review and authorization of substances other than WTCs, e.g. process chemicals.

The permittee must demonstrate that the use and discharge of any WTCs containing **phosphorus**, tributary to the Great Lakes Basin or other ponded waters, is necessary and that no acceptable alternatives exist. Please note that in some cases your permit may require modification to regulate phosphorus.

SPECIAL CONDITIONS continued

Generic WTC Usage Requirements

- (d) WTC use shall not exceed the rate reported by the permittee or authorized below, whichever is less.
- (e) The discharge shall not cause or contribute to a violation of water quality or an exceedance of ambient water quality criteria.
- (f) The permittee must maintain a logbook of all WTC use, noting for each WTC the date, time, exact location, and amount of each dosage, and, the name of the individual applying or measuring the chemical. The logbook must also document that adequate process controls are in place to ensure that excessive levels of WTCs are not used and subsequently discharged through outfalls. The permittee shall retain the logbook data for a period of at least 5 years. This period may be extended by request of the DEC.
- (g) The permittee shall provide an annual report, attached to the December DMR, containing the following information for each outfall: the current list of WTCs authorized for use and discharge by the DEC, for each WTC the amount in pounds used during the year, identification of authorized WTCs the permittee no longer uses, and any other pertinent information.

List of WTCs Authorized for Use and Discharge*

Affected Outfall(s)	Dosage (lbs/day)		WTC Manufacturer and Product Name	WTC Function
	Avg	Max		

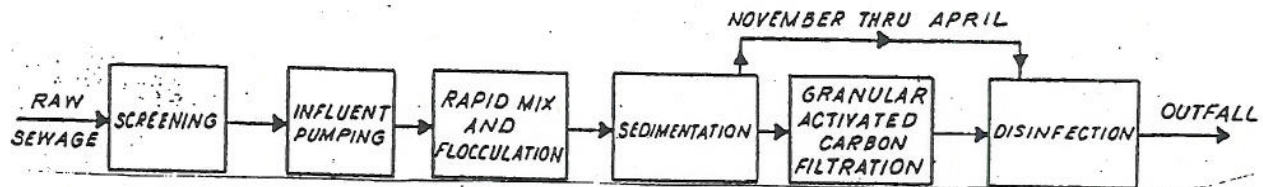
* - Authorized WTCs must either be listed above or identified in a letter sent to the permittee by the DEC subsequent to issuance of this permit page. In cases where a WTC is listed above and in a letter from the DEC, the more recent document will control.

MONITORING LOCATIONS:

The permittee shall take samples and measurements, to comply with the monitoring requirements specified in this permit, at the location(s) specified below:

INFLUENT: At influent pumping station

EFFLUENT and FLOW: After Chlorine Contact Tank



SPDES PERMIT NUMBER NY 0020168

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SCHEDULE OF COMPLIANCE:

The permittee shall comply with the following schedule:

Total Residual Chlorine

Action Code	Outfall Number(s)	Compliance Action	Due Date
1	1	The Permittee shall submit an approvable Engineering Report that identifies the facilities necessary to achieve compliance with the water quality based effluent limitation of 0.60 mg/l for total residual chlorine and a design level of 2.0 mg/L of dissolved oxygen.	March 1, 2010
2	1	The Permittee shall submit an approvable Final Plans and Specifications , as well as a Schedule of Construction , for the facilities described in the approved Engineering Report. The Permittee shall submit progress reports every 6 months detailing the work done in accordance with the approved engineering report and schedule of construction. The schedule of construction contained in the approved report shall, by this reference, be made part of the permit	March 1, 2011
3	1	The Permittee shall commence construction of the facilities described in the approved report, plans and specifications in accordance with the approved schedule of construction.	March 1, 2012
4	1	The Permittee shall complete construction in accordance with the approved schedule, and achieve compliance with the water quality limit of 0.60 mg/l.	No later than March 1, 2013

The permittee shall submit copies of any document required by the above schedule of compliance to NYSDEC Regional Water Engineer at the location listed under the section of this permit entitled RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS, unless otherwise specified in this permit or in writing by the Department.

The above compliance actions are one time requirements. The permittee shall comply with the above compliance actions to the Department's satisfaction once. When this permit is administratively renewed by NYSDEC letter entitled "SPDES NOTICE/RENEWAL APPLICATION/PERMIT," the permittee is not required to repeat the submission(s) noted above. The above due dates are independent from the effective date of the permit stated in the letter of "SPDES NOTICE/RENEWAL APPLICATION/PERMIT."

SPDES PERMIT NUMBER NY 0020168
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RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS

- a) The permittee shall also refer to 6 NYCRR Part 750-1.2(a) and 750-2 for additional information concerning monitoring and reporting requirements and conditions.
- b) The monitoring information required by this permit shall be summarized, signed and retained for a period of five years from the date of the sampling for subsequent inspection by the Department or its designated agent. Also, monitoring information required by this permit shall be summarized and reported by submitting:
- ☒ (if box is checked) completed and signed Discharge Monitoring Report (DMR) forms for each ____ month reporting period to the locations specified below. Blank forms are available at the Department's Albany office listed below. The first reporting period begins on the effective date of this permit and the reports will be due no later than the 28th day of the month following the end of each reporting period.
- ☐ (if box is checked) an annual report to the Regional Water Engineer at the address specified below. The annual report is due by February 1 and must summarize information for January to December of the previous year in a format acceptable to the Department.
- ☐ (if box is checked) a monthly "Wastewater Facility Operation Report..." (form 92-15-7) to the:
- ☐ Regional Water Engineer and/or ☐ County Health Department or Environmental Control Agency specified below

Send the DMRs with original signatures to:

Department of Environmental Conservation
Division of Water
Bureau of Water Compliance Programs
625 Broadway
Albany, New York 12233-3506
Phone: (518) 402-8177

Send a copy of each DMR page to:

Department of Environmental Conservation
Regional Water Engineer
SUNY Stony Brook
50 Circle Road
Stony Brook, New York 11790-3409
Phone: (631) 444-0405

Send an additional copy of each DMR page to:

Chief of Wastewater Management
Suffolk County Dept. of Health Services
360 Yaphank Ave.
Yaphank, NY 11980

- c) Noncompliance with the provisions of this permit shall be reported to the Department as prescribed in 6 NYCRR Part 750-1.2(a) and 750-2.
- d) Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit.
- e) If the permittee monitors any pollutant more frequently than required by the permit, using test procedures approved under 40 CFR Part 136 or as specified in this permit, the results of this monitoring shall be included in the calculations and recording of the data on the Discharge Monitoring Reports.
- f) Calculation for all limitations which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified in this permit.
- g) Unless otherwise specified, all information recorded on the Discharge Monitoring Report shall be based upon measurements and sampling carried out during the most recently completed reporting period.
- h) Any laboratory test or sample analysis required by this permit for which the State Commissioner of Health issues certificates of approval pursuant to section five hundred two of the Public Health Law shall be conducted by a laboratory which has been issued a certificate of approval. Inquiries regarding laboratory certification should be sent to the Environmental Laboratory Accreditation Program, New York State Health Department Center for Laboratories and Research, Division of Environmental Sciences, The Nelson A. Rockefeller Empire State Plaza, Albany, New York 12201.